

ISSUE SLIP STAPLE AREA (for additional cross references)

JCS 10/19

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	KL	1019	03-07-01
RESPONSE FORMALITY REVIEW	jcl	1020	6-21-01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 -+ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	4/27/03
2	✓	✓	5/14/03
3	✓	✓	5/13/03
4	I	I	
5	✓	✓	
6	N	N	
7	N	N	
8	✓	✓	
9	I	I	
10	I	I	
11	I	I	
12	I	I	
13	I	I	
14	I	I	
15	✓	✓	
16	N	N	
17	✓	✓	
18	N	N	
19	✓	✓	
20	I	I	
21	I	I	
22	I	I	
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25	I	I	
26	I	I	
27	I	I	
28	I	I	
29	I	I	
30	I	I	
31	✓	✓	
32	N	N	
33	✓	✓	
34	I	I	
35	I	I	
36	✓	✓	
37	-+ N	N	
38	N	I	
39	I	I	
40	N	I	
41	N	N	
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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